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May 9, 2017

**AFFILIATED SOUTH AMERICAN OFFICES ESTUDIO JAUREGUI & ASSOCIATES BUENOS AIRES, ARGENTINA** 

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WRITER'S CONTACT INFORMATION rdr@bloostonlaw.com

Marlene H. Dortch, Secretary Office of the Secretary Federal Communications Commission 445 12<sup>th</sup> Street, S.W. Washington, DC 20554

> The Ponderosa Telephone Co. Re:

Form 395 Common Carrier Annual Employment Report

WC Docket No. 16-233

Dear Ms. Dortch:

On behalf of The Ponderosa Telephone Co., we are submitting herewith its Form 395 Common Carrier Annual Employment Report for Calendar Year 2017.

In accordance with Rule Section 1.12 of the Commission's Rules, please direct any questions or correspondence regarding this filing to our office.

Sincerely yours,

Richard D. Rubino

Red QLO -

Counsel for The Ponderosa Telephone Co.

Attachment

## FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

COMMON CARRIER ANNUAL EMPLOYMENT REPORT
[Please read instructions before completing and for Notice regarding public burden.]

ANY INQUIRIES CONCERNING THIS FILING MAY BE REFERRED TO BLOOSTON, MORDKOFSKY ADDIGUTEROUS PROPERTY OF THE PROP 2130 L STREET, NEW Per response: (202) 659-0830

1. Name and Mailing Address of Respondent THE PONDEROSA TELEPHONE CO. PO BOX 21 O'NEALS, CA 93645	TELER	- 8	E CO.											Check his a char address.	Check here if this is a change of address.	
Year Report Filed     2017		μ	Reporting Period Period Covered b 3/3 1/2017	Period (Endivered by Rep	Reporting Period (Ending Date of Pay Period Covered by Report) 3/31/2017	y		4. Number o Reporting a. Fey b. 16	4. Number of Full-Time Employees during Selected Reporting Period (check one): a. Fewer than 16 (complete Sections I, IV, and V only) b. 16 or more (complete all sections)	nployees duri ( one): complete Sect	ng Selected ions I, IV, and ons)	( V only)				
SECTION II - Full-Time Employees.	/ees.															
								Num (Report emplo	Number of Employees (Report employees in only one category)	yees one category)						
Job								_	Race/Ethnicity							
Categories		Hispanic or	or						Not-Hispanic or Latino	c or Latino						Total
		Lagino				Male	ale					Female	ıale			Columns A-N
	Male		Female	White	Black or African	Native Hawaiian or	Asian	American Indian or	Two or more races	White	Black or African	Native Hawaiian or	Asian	American Indian or	Two or more races	
					_	Other Pacific Islander		Alaska Native				Other Pacific Islander		Alaska Native	2000	
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Executive/Senior Level Officials and Managers	1.1 1			5						w						9
First/Mid-Level Officials and Managers	1.2 I			6						4						=
Professionals	N			1												I
Technicians	3		-	14			1			4						23
Sales Workers	4															0
Administrative Support Workers	51			1						22				-		24
Craft Workers	6 1			9						1						11
Operatives	7			2												2
Laborers and Helpers	8															0
Service Workers	9															0
TOTAL 1	10 6		-	38	0	0	п	0	0	34	0	0	0	1	0	81
PREVIOUS YEAR TOTAL	11 6		2	35	0	0	2	0	0	33	0	0	0	1	0	79

Title of Person Signing General Manager	05/05/2017 N	ify that to the best of my k	SECTION V - Certification	This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company.  [Attach a list indirection parties have been filed against this company.]	This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, company before any body having competent jurisdiction in such matters during the calendar year covered by this report.	SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 101.311.	PREVIOUS YEAR TOTAL 1	TOTAL 1	Service Workers	Laborers and Helpers	Operatives	Craft Workers	Administrative Support Workers	Sales Workers	Technicians	Professionals	First/Mid-Level Officials and 1	Executive/Senior Level Officials and Managers				Categories	Job	OLO IIOM III - rai vi IIII o Liibioyees.
	Typed or Printed Name of Pe Matthew J. Boos	wledge, ir	ng parues	Commiss	Commiss body hav	ination (	11 0	10 0	Ψ	00	7	6	Ot	_4_	ω	N	1.2	1.1		8	Γ			7
	inted Nan SW J.]	nformation	HIVOIVE	ion that the involved	ion that n	Complain													Α	Male		Hispanic or Latino		
	Typed or Printed Name of Person Signing Matthew J. Boos	1, and belie	, uate illed	ne followin	o complair etent juris	ts Pursua	0	0											В	Female		9		
	on Signing	ef, all statem	, coults of a	g complaints	nts regarding diction in suc	nt to 47 CFF	0	0											С	White				
OF ANY ST		ents in this re	jelicies peloi	alleging viola	violations of	22.321, 23.	0	0											0	Black or African American				
ATION LICEN	Signature	port are true	e walch the m	ations of the p	the equal em	55, 90.168, 10	0	0											т	Native Hawaiian or Other Pacific Islander				
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ADE ON THIS STRUCTION F			n neard, ille nu	ny equal emplo	isions of Fede red by this rep	311.	0	0											9	American Indian or Alaska Native				Number of Employees (Report employees in only one category)
WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).			imber or other	syment oppor	ral, state, terr ort.		0	0											н	Two or more races				
			r designation,	tunity statute	itorial, or loca		1	0											-	White		Not-Hispanic or Latino	y	oyees one category
			and current s	have been file	l statutes hav		0	0											۲	Black or African American				)
			status or dispo	ed against this	This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report.  This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company.		0	0											^	Native Hawaiian or Other Pacific Islander	Fer			
	Telephone No. (559) 86		osition.	company.			0	0											Г	Asian	Female			
	elephone No. (559) 868–6000						0	0											Z	American Indian or Alaska Native				
							0	0											z	Two or more races				
							1	0	0	0	0	0	0	0	0	0	0	0	0		Columns A-N	Total		